

**CERTIFIED MAIL RECEIPT**

(Domestic Mail Only; No Insurance Coverage Provided)

**OFFICIAL USE**

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Postmark  
Here

Sent To	Jennifer Willis
Street, Apt. No.; or PO Box No.	POB 31356
City, State, ZIP+	Am Oh 45231